

STATEMENT FOR THE RECORD

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“Evaluating the Synthetic Drug Control Strategy”

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INTRODUCTION:

Chairman Souder, Ranking Member Cummings, Members of the Subcommittee, I appreciate the opportunity to appear before you today to discuss the recently released Synthetic Drug Control Strategy (SDCS). This strategy is a welcome first step from the administration, but there are serious shortcomings which may put the laudable goals of the strategy in jeopardy.

I am the President of the National Narcotic Officers' Associations' Coalition (NNOAC), which represents 44 state narcotic officers' associations with a combined membership of more than 62,000 police officers throughout the nation. I am a veteran police officer and have spent the vast majority of my thirty-three year law enforcement career assigned to

drug enforcement. Last year I retired from state service as an Assistant Chief with the California Department of Justice, Bureau of Narcotic Enforcement and continue to serve in law enforcement as the Director of the Northern California High Intensity Drug Trafficking Area (NC HIDTA).

Methamphetamine and the abuse of prescription drugs pose significant threats to the safety of every community in America. Despite the danger posed by global terrorism, no child in America has been killed as a result of a terrorist attack since September 11, 2001. Unfortunately, every child in our great nation will be exposed to illicit drugs through friends, family and schoolmates. The pervasive availability of methamphetamine and prescription drugs such as Xanax, OxyContin, Vicodin, Soma and steroids, will tempt many children to make that devastating choice to risk their life, liberty and future by using these and other powerful drugs of abuse.

The threat of synthetic drug abuse dates back to before the turn of the century when patent medicine was sold without prescription by drummers traveling throughout the nation resulting in per-capita drug addiction rates that rival those of today. But drug laws, beginning with the Harrison Act of 1914 and a strong anti-drug message worked to control the threat. We are once again faced with the threat of synthetic drugs as methamphetamine is manufactured in clandestine laboratories throughout the nation and from methamphetamine manufactured in Mexico and spilling across our porous border in record amounts. Synthetic prescription drugs and steroids are readily available on the Internet without a doctor's prescription and are also available from unregulated

pharmacies in Mexico. And Fentanyl has once again surfaced in Chicago, Philadelphia, the Midwest, Northeastern and California, resulting in a spike in overdose deaths.

Unfortunately, the widespread availability of powerful, highly addicting drugs poses as great a threat today as anytime in our nation's history. During my career I have personally witnessed every drug use trend including methamphetamine, crack cocaine, PCP and LSD that our nation has experienced in the past thirty-three years. I seized my first meth lab in 1981 and since that time I have investigated several hundred meth labs and/or meth distribution organizations. Those labs and organizations have ranged from the very small to some of the largest and most sophisticated labs seized in the United States. I have seen firsthand the death, lost opportunities, devastation, violent crime and environmental destruction that drug use brings to our cities and towns. Despite the danger posed by all drugs of abuse, I have never seen a drug cause more devastation to users and their families than methamphetamine. This highly addicting drug robs families of their children, young people of their dreams and our country of the bright minds and sound bodies that we must rely upon to remain strong. Methamphetamine causes parents to choose the drug over the safety and welfare of their children. In communities where meth use is prevalent, as much as 85% of the child abuse and endangerment is attributed to meth use. And highly toxic meth labs threaten neighbors and the environment with the carcinogens that are used in the volatile process of manufacturing this poison.

On June 8, 2006 I attended the Vigil for Lost Promise, which was the vision of Ginger Katz who lost her son Ian to a heroin overdose. Ginger, along with six other parents who

had lost children, and Drug Enforcement Administration Administrator Karen Tandy co-sponsored this moving event to focus attention on the devastating effects of drug abuse. Seeing the faces of those who had lost their lives to drug use as they were flashed upon the screen during the vigil and seeing the pain that each surviving family member was experiencing as they relived those personal tragedies brought back hundreds of personal memories of delivering death notices to parents who had lost a child a drug overdose or a drug related traffic collision. It also brought back the feeling of despair that occurred each time I raided a drug house and found innocent young children being raised with the danger and hopelessness that is an everyday part of the drug lifestyle. That June 8th Vigil reminded me why the mission of America's narcotic officers is so important and why we must all work together for sound drug policies to protect our children from the cruelty and misery of drug abuse.

**SYNTHETIC DRUG CONTROL STRATEGY DEVELOPED WITHOUT
CONSULTATION WITH KEY GROUPS:**

The Synthetic Drug Control Strategy (SDCS) strategy is an important step toward protecting our children. I know that much work went into the development of this strategy by the Office of National Drug Control Policy (ONDCP), which took the lead on this project along with the Department of Justice (DOJ) and Health and Human Services (HHS). But the question must be asked: why did it take so long to decide to prepare a strategy and why more partners were not consulted in a collaborative development of the SDCS. This plan – although a move in the right direction – does not represent a strategy supported by concrete actions. Like many other strategies developed by ONDCP, it was

written with little or no substantive input to ONDCP from the key constituencies who will be charged with executing it. Without action – and lacking buy-in from the stakeholders – the Synthetic Drug Control Strategy is in danger of becoming irrelevant before it has a chance to succeed.

In the early 1990s California narcotic officers were witnessing an explosion in the number of clandestine methamphetamine labs that were being seized throughout the state. At the same time, communities throughout the West and Midwest were experiencing record numbers of meth related overdoses, emergency room admissions, domestic violence, child abuse incidences and other indicators that meth use was rapidly on the rise. An interesting phenomenon noted by California narcotic officers was a transfer of meth production from the Hells Angels and other outlaw motorcycle gangs to drug organizations controlled by Mexican Nationals using ephedrine and pseudo-ephedrine as the primary precursor chemical rather than phenyl 2 propanone (P2P) and methylamine. This change in manufacturing procedure resulted in a more powerful and addicting form of the drug.

In 1995, as the President of the California Narcotic Officer's Association, I conducted briefings on this emerging drug threat for then-DEA Administrator Tom Constantine, then-ONDCP Director Barry R. McCaffrey, and Senator Dianne Feinstein. The "Precursor Control Act" of 1996, sponsored by Senator Feinstein, grew directly out of that first briefing. Administrator Constantine responded immediately to the threat and hosted the first International Methamphetamine Conference where members of law

enforcement, treatment and prevention came together to learn more about the emerging meth problem and its deadly consequences.

I had the privilege to serve as one of the curriculum co-chairs for the meth strategy conference. Following two days of informative plenary sessions, attendees participated in topical break-out sessions which were facilitated and recorded. The results of those collaborative break-outs and the presentations by subject matter experts resulted in the publication of the Department of Justice and DEA's National Methamphetamine Strategy. These were good plans – developed in a collaborative manner with buy-in from several stakeholder groups – but at the time they were developed, the meth problem remained geographically limited.

The DEA meth conference was followed by ONDCP's Western States Meth conference. That summit followed a similar format of presentations by experts and collaborative sessions to further develop ONDCP's response to the meth problem. At that conference, during their respective presentations, Senator Feinstein, Director McCaffrey and Administrator Constantine each credited me and my California law enforcement colleagues with being the first to ring the bell on this emerging drug trend. By then, meth was beginning to spread eastward because international DTOs were using their existing heroin and cocaine distribution networks. Working narcotic officers – not bureaucrats from within the Beltway – had the accurate, first-hand knowledge that shaped the initial national response to the problem.

Unfortunately, since 2001 this collaborative effort has disintegrated. Since 2001 I can only recall being invited to two constituent group meetings to discuss drug policy issues. My organization, along with many others including ONDCP's own HIDTA Directors, are rarely consulted and never included in any type of collaborative process when addressing emerging issues, developing policies or preparing major strategic documents. Not only were the NNOAC and HIDTA Directors not consulted by ONDCP for the development of the SDCS, we were not consulted on the development of last year's Synthetic Drug Action Plan or the Southwest Border Strategy.

An excellent example of how law enforcement can serve as a barometer to warn of emerging drug threats and to assist in developing responses to those threats is the current explosion in Fentanyl use and related overdose deaths. The first three intelligence bulletins describing the nature of the emerging Fentanyl problem were prepared and distributed by the San Diego (CBAG) Chicago and Philadelphia HDTAs. To follow up on the threat, the Chicago HIDTA, Chicago Police Department and DEA are hosting a conference to allow agencies that are being impacted by this problem to discuss the scope of the threat and strategies for addressing it. I was glad to see the major Fentanyl lab bust in Mexico last week, and I'm afraid that's the tip of the iceberg.

One of the three main goals of the strategy is to significantly reduce domestic labs, yet this strategy comes as the domestic meth lab problem has already dramatically declined. Thanks to proactive steps by progressive states, and thanks to Congress ensuring that harmful budget recommendations are not followed, clandestine domestic meth seizures

continue to decline. Just yesterday Minnesota announced a reduction of more than 70% in meth lab seizures.

The Combat Meth Act, passed by Congress as part of the PATRIOT Act reauthorization earlier this year, created a much-needed national standard. Unfortunately, while the NNOAC and other key stakeholders worked closely with congressional staff to write, refine and seek passage of this important legislation, ONDCP was nowhere to be found. I personally heard complaints from many key House and Senate staff members that were working on this legislation stating that they could not get any form of assistance from ONDCP despite repeated attempts to obtain that support. The Combat Meth Act, perhaps the most important anti-meth legislation to date, was shaped and enacted without input and in some cases over the objections of ONDCP.

ONDCP HAS NOT DEMONSTRATED INTEREST IN THE METH PROBLEM:

Since 2001, ONDCP has seemed very reluctant to be engaged on the meth issue and even less likely to support the efforts of – or acknowledge the expertise of – state and local law enforcement officers. Despite extensive attention by the media, legislative action by many local communities, states and the Congress over the past five years, ONDCP leadership was inexplicably mute on the subject of meth. Much was being done by ONDCP's twenty-eight High Intensity Drug Trafficking Areas (HIDTA) to address the meth threat in their regions. Under the leadership of Deputy Director Scott Burns, ONDCP's Office of State and Local Affairs was working hard to support each HIDTA's meth enforcement efforts. Despite this, little or no leadership was received from the

ONDCP Director. And this lack of focus relative to meth was not only true with enforcement activities. The leadership of ONDCP also seemed to need prodding to address the meth epidemic in the Youth Media Campaign. True, the national stats on meth use are relatively low, but to look only at the national numbers without considering regional impact or the unique nature of the drug is to ignore critical facts.

While I have serious concerns regarding budget priorities for justice assistance programs in the President's budget, I can say that the efforts of the United States Department of Justice, especially the Drug Enforcement Administration and the Bureau of Justice Assistance, have been more encouraging than the efforts of ONDCP. It was not until Attorney General Alberto Gonzales spoke out on the meth threat that started paying more attention. Attorney General Gonzales broke the administration's silence on meth in a speech to district attorneys on July 18, 2005. He said "in terms of damage to children and to our society, meth is now the most dangerous drug in America." Shortly thereafter, an ONDCP spokesman wrote off the focus on meth by saying that people are "crying meth because it's a hot new drug." Of course people were crying meth, but those of us in law enforcement, treatment and prevention knew that we were not facing a new problem – we were facing a problem that was growing worse by the day. Those persons that were calling attention to the meth problems were the cops, emergency medical technicians, treatment providers, drug court judges and community based prevention coalitions that were being overwhelmed by the meth problem in many parts of the country. These were real authorities with real responsibilities, real addicts and real meth labs on their hands. They weren't "crying meth" just to make noise; they were asking for help. ONDCP not

only ignored them, they even tried to tell them that they didn't really have a problem.

This is inexcusable, Mr. Chairman, and this Synthetic Drug Control Strategy continues to reflect ONDCP's disregard for the experience and perspectives of the experts on the ground.

Where was the Drug Czar – our nation's primary spokesperson on the threat of drug abuse – on this issue when most Americans, either through first-hand experience or exposure through the media knew the seriousness of the threat posed by meth? Why are we just now releasing this synthetic drug strategy, when the problem was pervasive and well-known in 2001? I believe the answer is that ONDCP has been out of touch when it comes to meth.

This strategy was formed without the consultation of the National Narcotic Officers' Associations' Coalition, the National HIDTA Directors, the National Alliance of State Drug Enforcement Agencies, or many other groups representing treatment, prevention, and law enforcement. Although there are some references to consulting with HIDTA Directors and the NNOAC, I can assure you that the consultation referred to consisted only of seeking seizure and other statistical data. Mr. Chairman, even though you and the members of the subcommittee and your staff have developed significant expertise in drug policy and criminal justice issues you still hold hearings to become better informed on the specific issues that you are addressing. I am also in frequent contact with your staff and staff members from throughout the Congress as they work on drug policy issues. It is unfortunate that ONDCP has not taken a cue from you and your colleagues to use the

same system of collaboration as they tackle these difficult and complex drug policy issues. Regrettably, there was never a collaborative process where ONDCP sat down with the practitioners in state and local law enforcement, as had prior ONDCP administrations. Sadly, it appears to me that the preparation of this critically important strategy was prepared in a Washington D.C. vacuum while ignoring the experience of the 62,000 law enforcement officers represented by the NNOAC, the 33 HIDTA Directors and I suspect members of other key constituent groups.

If the NNOAC had been consulted by ONDCP, we would have made the following key recommendations:

- Fully fund the Byrne Justice Assistance Grant formula program that has been responsible for thousands of meth lab seizures at the authorized level of \$1.1 billion (authorized in the Department of Justice Appropriations Authorization Act of 2006);
- Fund the COPS Methamphetamine Hot Spots program, which has provided valuable resources to scores of particularly hard-hit jurisdictions to train, equip, and mobilize law enforcement resources to address the meth production and addiction problem;
- Urge Congress to authorize the Center for Task Force Training (CenTF) at the Bureau of Justice Assistance (BJA), which provides essential and much-needed training for drug task force commanders and methamphetamine investigators;
- Ensure that the OCDETF Fusion Center that is referenced in the strategy is coordinated with the Regional Information Sharing Systems (RISS) centers and

the HIDTA Intelligence Centers, and ensure that the OCDETF Fusion Center follows the National Criminal Intelligence Sharing Plan guidelines developed by the Global Intelligence Working Group at the Bureau of Justice Assistance.

SPECIFIC PROBLEMS WITH THE SDCS:

While the release of this strategy is a positive step, the lack of collaboration with state and local entities stakeholders has resulted in serious flaws in the strategy which call into question its viability.

The Synthetic Drug Control Strategy talks about training law enforcement, yet the administration's FY 2007 budget request, supported by ONDCP, eviscerated the primary meth enforcement and meth related training programs for state and local law enforcement, including the Byrne Justice Assistance Grant program, Community Oriented Policing Services (COPS) Hot Spots, and the Bureau of Justice Assistance's Center for Task Force Training (CenTF). ONDCP had also supported those same budget cuts last year along with significant cuts to the HIDTA Program. It is difficult to believe that the leadership at ONDCP truly wants to address the meth problem if they openly support cuts to programs that fund training and enforcement activities for state and local law enforcement when it is those state and local cops that account for 97% of all drug arrests in America including those associated with methamphetamine manufacturing and distribution.

State and local drug enforcement task forces funded through the Byrne Justice Assistance Grant (JAG) program were responsible for seizing over 5,400 meth labs in 2004 alone. HIDTA Initiatives were also responsible for seizing significant numbers of meth labs and HIDTA Intelligence Centers provided much needed intelligence support and coordination to target lab operators and complex meth drug trafficking organizations. How could the authors of this strategy possibly ignore the reality that more than one third of all meth lab seizures were conducted by Byrne-funded task forces, and strongly support recommendations by OMB to eliminate the Byrne JAG program?

How effective is a strategy that establishes lab seizures as a goal and then takes away funding from the law enforcement programs that make these seizures? How can law enforcement be expected to accomplish a goal when their basic tools are taken from them?

The strategy states that “The production and use of methamphetamine and the non-medical use of controlled substance prescription drugs are among the Administration’s foremost concerns related to illicit drugs.” Yet ONDCP leadership has consistently led Congress and stakeholders to believe otherwise by ignoring pleas to deal with the issue.

In discussing measurement of the strategy’s effectiveness, the strategy states that monitoring of arrests, Southwest border seizures, and treatment admissions related to synthetic drugs will not be considered indicative of synthetic drug usage. I understand the point as it relates to usage rates, but the statement has the effect of discounting the

importance of law enforcement activities. In the wake of dramatic declines in domestic meth labs, law enforcement across the country is reporting a surge in Mexican-produced meth being trafficked into new regions. Given that reality, Southwest border seizures and overall synthetic drug-related arrests MUST be key pieces of the strategy, and the measurements of those activities are appropriately indicative of law enforcement's effectiveness in addressing the synthetic drug problem.

With regard to the strategy's stated goal of reducing domestic methamphetamine laboratories by 25 percent between 2005 and 2008, why isn't the same logic applied here as is applied to arrest and quantity seizure numbers mentioned above? Seizure of domestic labs is dependent in part upon law enforcement presence: if law enforcement reduces resources dedicated to seeking and seizing labs, then we will see fewer labs seized. Less enforcement equals fewer labs seized. That is not success, it is surrender.

If the administration wants to reduce lab seizures, it is already following a good strategy – take away the Byrne-JAG drug task forces and I guarantee you will have fewer lab seizures. If you take away those Byrne-funded task forces, you will have lower meth lab seizure statistics, but you will have made no impact on the problem. The meth supply will continue to grow, as will the toxic meth waste that is being dumped in many neighborhoods.

The SDSCS states that “the most urgent priority of the Federal government toward reducing the supply of methamphetamine in the United States will be to tighten the

international market for chemical precursors, such as pseudoephedrine and ephedrine, used to produce meth.” The NNOAC agrees that international precursor control is key to disrupting the flow of methamphetamine to the streets of America and that it must be addressed. The federal government has an inherent responsibility to address it, since it involves international negotiations, monitoring and interdiction operations. Entities such as JIATF South must be utilized to disrupt the precursor market in the Eastern Pacific, Caribbean and Gulf of Mexico. And since the bulk of synthetic drug precursors are manufactured in a handful of facilities in South and Southeast Asian countries and trafficked heavily along the Pacific Rim, JIATF West can play a critical role in assisting partner nation counter-drug forces address the problem and in integrating intelligence and monitoring activities with nations in the region. Intelligence regarding international precursor availability and international DTOs which is gathered domestically and analyzed by DEA, the RISS projects, and HIDTA ISC’s must also be used to properly address this threat.

The strategy discusses trends over the past five years indicating that “small meth labs were collectively gaining and operators of larger labs were losing market share. This was consistent with what communities were reporting: more methamphetamine labs.” When this trend was occurring, law enforcement, treatment, prevention groups, and members of Congress were alerting ONDCP, and yet they stood silent. Congress acted without significant input from the administration (and in some cases in spite of administration attempts to derail certain provisions) to craft and ultimately pass sweeping anti-methamphetamine legislation – the Combat Meth Act.

The NNOAC is grateful to many dedicated members of Congress for their action on the Combat Meth Act. It is having an impact. Restrictions on precursor chemicals were critical because law enforcement resources were tied up with the small-time lab problem. We have to remain vigilant on this front, but we must also act on the reality that most meth is now coming over our international borders.

The trend of superlabs moving to Mexico from California was due in part to stronger precursor interdiction activities such as DEA's Operation Mountain Express, but it was also due in part to aggressive state and local meth enforcement strategies within California. In particular, the California Bureau of Narcotic Enforcement administered the California Methamphetamine Strategy (CALMS), which successfully focused on organizational targets and super lab operators. How were those strategies funded? Through the COPS Hot Spots program, Byrne-funded task forces, and HIDTAs – all programs which the administration wants to cut despite their demonstrated successes.

The strategy states that “the Federal government provides significant assistance to State and local law enforcement in responding to small toxic labs, and will continue to do so....Federal, State, and local governments share responsibility for attacking the large domestic laboratories.” Two reactions: the first statement rings hollow in the wake of two straight years of devastating administration budget requests for state and local law enforcement assistance programs. The second statement is absolutely accurate, but

would be made impossible if the administration's budget recommendations to cut Byrne JAG were followed.

The strategy refers to the OCDETF Fusion Center. The Fusion Center is an important component of intelligence-driven law enforcement, but we must ensure that the OCDETF Fusion Center is coordinated with the HIDTA Intelligence Centers and the Regional Information Sharing Systems (RISS) centers. These existing networks are the backbone of criminal intelligence and information sharing and must be recognized as such. Also, we must ensure that the OCDETF Fusion Center follows the Fusion Center Guidelines and the National Criminal Intelligence Sharing Plan (NCISP) which were developed by the Bureau of Justice Assistance through the Global Intelligence Working Group (GIWG).

In the strategy section entitled "The Domestic Focus on Methamphetamine and Other Synthetics", the SDCS states that "The Administration will continue to partner with State, county, tribal, and city governments over the next three years to attack the illicit use of methamphetamine. State and local partners are crucial in carrying out the Administration's strategy for the synthetic drug problem, utilizing law enforcement, treatment, and prevention." Yes, state and local partners are crucial, but this statement rings hollow. The administration has proposed in the past two years to DISENGAGE from state and local partnerships by requesting termination of key assistance and training programs in the annual budget request such as Byrne JAG, COPS Hot Spots, and the Center for Task Force Training (CentTF).

The strategy sets eleven “Strategic Goals” for working with state policy makers in 2006 and beyond. Two of the goals deal with assistance to state and local governments: “continue law enforcement training”, and “provide resources for methamphetamine lab cleanup, treatment, and prevention.” Achieving these goals is impossible without continuation of programs such as Byrne JAG, COPS Meth Hot Spots, and the Bureau of Justice Assistance’s Center for Task Force Training (CenTF).

Paying lip service to the importance of federal-state-local law enforcement partnerships without putting resources and actions behind the words is a recipe for a failed Synthetic Drug Control Strategy.

The NNOAC is working closely with the Bureau of Justice Assistance to improve meth enforcement capacity on tribal lands. These areas have been devastated by substance abuse and addiction, including most recently methamphetamine. There is a real need for training and equipment to help tribal law enforcement deal with the meth problem, and the NNOAC appreciates BJA’s collaboration on this project and their continued willingness to collaborate on other programs involving the reduction of the drug threat. In fact, a series of focus groups facilitated by BJA are scheduled in the coming weeks to help identify the largest capability gaps and most pressing needs to get much-needed meth programs to tribal lands.

The NNOAC strongly supports the nation's Drug Courts and applauds their inclusion in this strategy. Drug Courts are an important innovation in current drug enforcement and treatment policy. Methamphetamine is a powerfully addictive drug, and treatment of meth addicts, although successful in situations where addicts receive clinically appropriate treatment, is a long-term proposition. We believe that using the coercive power of courts is essential in helping non-violent drug offenders and addicts succeed in recovery.

As I have repeatedly stated over the years, education and prevention incredibly important. As long as drug traffickers ply their trade, narcotic officers will be there to clean up and punish producers and traffickers. But stopping use before it starts should be our ultimate goal. The things I have seen meth addicts do to themselves and to others would make members of this subcommittee cringe. Collectively, we MUST do all we can to prevent first use. Community anti-drug coalitions are critical. Negative social messages through effective media campaigns are important. Aggressive law enforcement against meth producers and traffickers is essential.

To address the growing problem of prescription drug abuse, education and prevention are critical. Legally obtained prescription medications are often misused and diverted. Law enforcement has little role to play before the diversion takes place. Strong prevention messages must reach our children before they start abusing. Clearly, the threat posed by the abuse of powerful prescription drugs will require adequate resources and new strategies as we aggressively address the on-line distribution of drugs in America.

CONCLUSION

This spring I held the hand of my friend – a law enforcement officer – as he died from cancer that resulted from his years of exposure to toxic chemicals at the meth labs he investigated. This exposure to carcinogens occurred years before we were trained on what protective measures must be taken by responding officers. Remediation of meth labs is a critical safety issue for families, neighbors, children, and law enforcement officers, and it must be a priority.

While I don't want to downplay the importance of the Synthetic Drug Control Strategy, I am disappointed that it provides little new strategic direction to address the meth problem. I am hoping that with the continued leadership of this subcommittee and your colleagues in both Houses of the Congress, this strategy will be re-thought in a collaborative environment with input from all of the key constituents and that a new, more robust and well thought out Synthetic Drug Control Strategy will be the result.

Mr. Chairman, Ranking Member Cummings, members of the Subcommittee, I want to thank you for inviting me to share the views of America's narcotic officers. We applaud you for all that you have done to promote sound drug policy. The members of the NNOAC hold you in great esteem and appreciate your service to America.